

INFORMATION TECHNOLOGY (IT) PROGRAM

MISSION CRITICAL SKILLS BONUS **REPAYMENT AGREEMENT**

I, the undersigned employee, agree to repay to the state of Michigan the entire mission critical skills bonus of \$_____, including tax withholdings thereon, in the event I leave my information technology position with _____, within one year from _____, which is the first day of the pay period in which this bonus becomes effective.

Further, I agree that any amount to be repaid will be owed and payable in full, in the form of a certified check or money order to the agency within thirty days of the termination date with the agency, or in the form of a negative gross pay adjustment processed in my final paycheck.

Employee's Identification Number

Employee's Name (Please Print)

Employee's Signature

Date

Manager's Name (Please Print)

Manager's Signature

Date

Appointing Authority's Signature

Date